



Environment of Care

Introduction

- Practices such as fire drills, emergency preparedness drills, cleaning up spills and disposing of hazardous materials will be a routine part of your professional career at our medical center.
- To maintain a proper Environment of Care (EOC), it is important that all employees are familiar with life safety requirements (any safeguards in case of a fire emergency) as well as other safety and security issues that can be found in the ECHCS Safety Manual.

What You'll Learn

- ◎ As a result of successful completion of this module, you will be able to:
 - Respond appropriately in case of an emergency
 - Demonstrate proper handling and identification of biomedical waste
 - Recognize employee rights regarding chemical hazards
 - Extract information from a Safety Data Sheet
 - Identify and respond to safety hazards
 - Respond to security guidelines and regulations
 - Properly select, use, inspect and maintain medical and non-medical equipment
 - Describe your role in the event of a critical utility system failure

Importance

- The goal of our Environment of Care (EOC) program is to provide a safe, functional, and effective environment for patients, staff members, and other individuals in the hospital
- Each employee is responsible for ensuring the safety of patients, visitors and others
- This is crucial to providing patient care and achieving good outcomes

Topic Outline

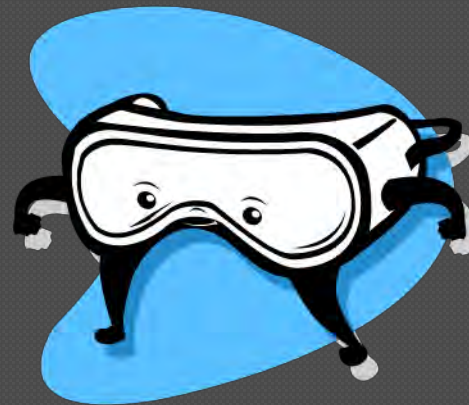
- ◎ This module is divided into the following topics
- 1. Safety Occupational Health and Fire Program
- 2. Emergency Preparedness
- 3. Hazardous Material & Waste Management
- 4. Safety Hazard Recognition
- 5. Security Management
- 6. Medical Equipment Management
- 7. Utility Systems Management

Topic 1 – Safety, Occupational Health and Fire Program



Overview

- In this topic, you will learn the objectives of the Safety, Occupational Health and Fire Program, how the program is organized, how the effectiveness of the program is determined, and the purpose of the EOC Committee



Objective of Program

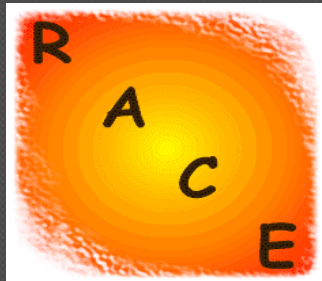
- ◎ It is important that all hospital employees understand the Safety, Occupational Health and Fire Program and how it works in order to:
 - Promote a safe, hazard free working environment for employees, patients and visitors
 - Assist you in recognizing emergency situations and how to respond correctly and quickly to them
 - Outline safety procedures to address specific hazards
 - Maintain a record of injuries, illnesses, accidents and fatalities that occur
 - Allow employees to request OSHA inspect a work place without concern for punitive action

How is the Safety, Occupational Health and Fire Program Organized?

- It is facility wide and department specific.
- The program is described in the ECHCS Safety Manual, which is located on the ECHCS Intranet Home Page
- The program is coordinated by the Safety Officer, who chairs or is a member of the EOC Committee
- The Safety Officer coordinates: Safety, Life Safety, Medical Equipment, Security, Utilities Management, Hazardous Materials, Biomedical Waste, Green Environmental Management System (GEMS), Fire Prevention and Emergency Preparedness

What to do during a fire – Remember RACE

- The **R** in **RACE** is for Remove. Remove all persons in immediate danger to safety. This action may include moving patients to another zone on the same floor, another floor, or outside the building.
 - Please check with your supervisor or the unit supervisor in your area about whether or not you may assist with relocating patients.
- The **A** in **RACE** is for Activate. Activate closest fire alarm pull station, call 3911 (hospital campus) or 911 (other sites) and report location, and announce CODE RED in area of alarm.
- The **C** in **RACE** is for Close. Close doors and windows to prevent the spread of smoke and fire.
- The **E** in **RACE** is for Extinguish or Evacuate. Try to extinguish the fire only after the RAC portion has been initiated. Evacuate per the plan established in your area.



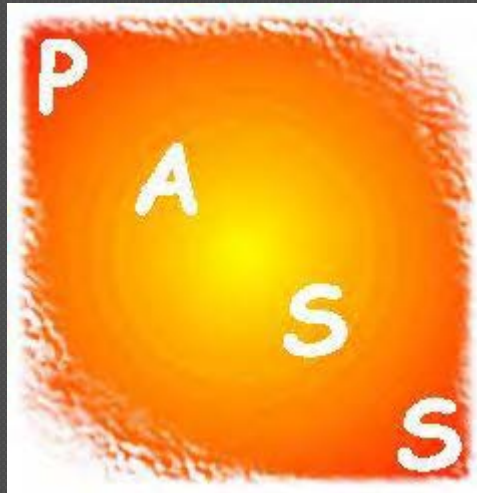


Fire Extinguishers

- Most fire extinguishers provide 60-90 seconds of spray (depending on the size) in order to extinguish small fires or to slow or contain larger fires.
- IMPORTANT NOTE: A fire extinguisher WILL NOT extinguish large fires! The primary intent of a fire extinguisher is to get you safely out of a fire.
- Types of Fire Extinguishers
 - Type A – ordinary combustibles (wood, paper, plastic)
 - Type B – flammable liquids
 - Type C – electrical fires
 - Type ABC – can be use on all types of fires
 - Type K – used for kitchen grease fires
- To assist you, the appropriate type of fire extinguisher is placed in your area.

Fire Extinguishers Operation

- ◎ Use the word P-A-S-S to remember how to operate a fire extinguisher.
 - Pull the pin
 - Aim hose at base of fire
 - Squeeze the handle
 - Sweep spray from side-to-side across the base of fire



Sprinkler Systems

- Remember, do not stack items within 18" of sprinklers. It can obstruct the spray!



In the Event of an Accidental Spill, Release or Leakage of Hazardous Substance

◎ Remember SPIL

- S = Secure the area. Evacuate all personnel from the spill area and allow NO one to enter the spill area. If the chemical substance is highly flammable and fire is involved, the R.A.C.E (Rescue, Alarm, Contain, Evacuate/Extinguish) procedure shall be followed.
- P = Protect Person
- I = Inform
 - During normal duty hours 7:30 a.m. to 4:00 p.m., Monday through Friday), call Facilities Management Service. Pueblo Community Living Center and Community Based Outpatient Clinics will call 911, then the OSH Office in Pueblo at 719-253-7184.
 - After normal duty hours (weekends, holidays, and from 4:01 p.m. to 7:29 a.m., Monday through Friday), contact the AOD. Community Based Outpatient Clinics are only open during normal duty hours. The Pueblo Community Living Center will immediately dial 911, and initiate the cascade-calling list.
 - Report the following: The location of the spill, chemical involved, the amount spilled, and any injuries.
- L - Leave for clean up team: Leave the affected area and remain nearby until response personnel arrive. Extended Care and Community Based employees will remain nearby to provide the fire department with specific details of the spill, and an SDS for the hazardous material spilled.

What is the Environment of Care Committee (ECC)

- ◉ The purpose, policy, responsibilities and procedures of the ECC are listed in ECHCS Policy 00-85, Environment of Care Management Program.
- ◉ The ECC is a multidisciplinary committee. The goal of this committee is to provide a safe, functional environment which benefits employees as well as patients and visitors
- ◉ This environment allows employees to go about their daily routines providing care and comfort to patients

What does the ECC do?

- ◉ Conducts an annual assessment of the Environment of Care Program (ECP)
- ◉ Meet monthly to review the effectiveness of the ECP and assist with implementation of supporting programs
- ◉ Ensures that there will be adequate policies, procedures, staff, training, equipment, and materials

ECC's Methods of Monitoring Effectiveness

- ◎ Review effectiveness of safety, life safety, hazardous materials/GEMS, emergency preparedness, equipment, utilities and security management programs as well as community based care programs.
- ◎ Through inspections of areas conducted at least twice annually

Summary

- ◎ You must be able to recognize emergency situations and respond correctly and quickly to them.
- ◎ Both patients and visitors rely on YOU to protect them in emergencies
- ◎ For more information, contact the ECHCS Safety Manager or the Southern COBC Safety Specialist.

Topic 2 – Emergency Preparedness



Emergency Preparedness and Response

- ◉ Emergency Codes
- ◉ Emergency Operations Plan
- ◉ When Disaster Strikes
- ◉ Receiving Emergency Notifications
 - VANS

Emergency Codes and What To Do

◉ **Code Blue – Cardiac Arrest**

- All trained staff are responsible for initiating CPR

◉ **Code Yellow – Disruptive Behavior**

- Code Yellow Team (trained clinical staff) respond to location and meet with person in charge

◉ **Active Threat Response**

- Evacuate – if there is an escape route, escape and call Police 911
- Evade – if you cannot evacuate, hide out of sight, stay quiet, cell phone silenced
- Engage – if you cannot escape or evade then engage – be aggressive, use anything you can find as a weapon
- Comply – stay calm, follow Law enforcement orders, keep hands up, do not yell or point

Emergency Codes and What to Do

◉ **Code Red - Fire**

- Hospital staff who hear three chime notifications without voice notification and/or see strobe lights flashing, should be aware that the fire situation is in that area and they should follow the R.A.C.E. protocol in that area
- Hospital staff who receive three chime notifications with voice notification should be aware fire is nearby and be prepared to take appropriate action
- PCLC, CBOC, and Extended Base (EB) & Community Care Service (CC) Facility Staff should take appropriate action based on their local policy
- Follow the P.A.S.S. procedure should you need to use a fire extinguisher

◉ **Code Triage – Internal/External Disaster**

- Follow directions given by the Hospital Emergency Operations Center

◉ **Code White – Missing Patient/Resident**

- Follow directions by supervisor
- A designated team will carry out a full search

Emergency Codes and What to Do

◉ **Code Black – Bomb Threat**

- Follow directions of supervisor, notify VA Police and/or local law enforcement

◉ **Code Adam – Missing child**

- All staff will be on the lookout for missing child
- Notify VA Police if missing child is found in the presence of another person other than parent or legal guardian

◉ **Code Orange – Hazardous Chemical Spill**

- Follow the SPIL procedure

◉ **Severe Weather – Tornado Event**

- Move away from all glass areas/open areas to an internal corridor
- Find something to cover your head
- Stay in place until all clear

Emergency Preparedness Overview

- ◎ Knowledge of our Disaster Plan will enable you to provide proper direction and training to employees in the event of an internal disaster, external disaster or community emergency.
- ◎ Staff are trained and prepared to deal safely and effectively with disastrous events which may require evacuation of the facility including
 - Major Fire or Explosion
 - Major Utility System Failure of Long Duration
 - Loss of Steam
 - Loss of Electricity
 - Major Environmental Contamination

Emergency Operations Plan

- ◎ The ECHCS Emergency Operation Plan has adopted the National Incident Management System's (NIMS) approach to managing emergencies.
- ◎ This uses an "all hazards" approach, meaning that we respond to all threats/emergencies in a consistent, flexible and adjustable manner.
- ◎ The staff's primary responsibility during a disaster is to protect patients and visitors.
- ◎ ECHCS Emergency Preparedness and Response plans are located on the Homepage in the SharePoint folder - <http://vaww.visn19.portal.va.gov/sites/ECHCS/Emergency/SitePages/Home.aspx>

When Disaster Strikes

- ◎ ECHCS facilities will manage emergency events using the HOSPITAL INCIDENT COMMAND SYSTEM (HICS)
 - **Command:** Includes the Incident Commander and his/her staff (Public Information Officer, Safety Officer, Liaison Officer and any necessary Medical/Technical Specialist) This function is **always** activated
 - **Operations:** Conducts the tactical operations to carry out the plan using defined objectives and directs all needed resources.
 - **Planning:** Collects and evaluates information for decision support, maintains resource status information, prepares documents such as the Incident Action Plan and maintains documentation for incident reports.
 - **Logistics:** Provides support, resources and other essential services to meet the operational objectives by the Incident Commander.
 - **Finance/Administration:** Monitors costs related to the incident while providing accounting, procurement, time recording and cost analysis.

Initiate Disaster Plan

- ◎ Begins with an employee discovering an emergency event
 - Individual remains in charge until a better qualified person arrives and assumes Incident Commander role.
- ◎ Report incident to supervisor
- ◎ Notify VA Police Dispatch 3911 if in hospital or CBOCs call 911 then notify Medical Center Director
- ◎ Police Dispatch Center will announce a CODE TRIAGE via overhead page or radio
 - CBOCs and satellite facilities will receive the code in accordance with Service Level/Site Plans for local site

Personnel Pool

- ◉ In the event of a disaster, the Director of the hospital or designee will provide appropriate direction to employees
- ◉ Know your Service Specific Emergency Preparedness Plan
- ◉ Know where you have to report during an emergency



Emergency Notifications

- It is important that you receive notifications when emergencies/severe weather/events take place that impact ECHCS facilities
- VANS (VA notification system) is the system used to add/update your emergency contact number, below is the link
- <https://alertswest.vans.va.gov/client/auth/login>

Topic 3 – Hazardous Material & Waste Management



Overview

- ◎ To protect yourself and others from potential contamination, it is important to be able to identify hazardous biomedical waste and properly manage potentially infectious waste. It is very important that you know your rights regarding chemical hazards.
- ◎ In this topic you will learn to:
 - Identify and properly manage biomedical waste
 - Recognize your rights regarding chemical hazards
 - Extract information from a Safety Data Sheet (SDS)

Biomedical Waste

- ◎ Biomedical waste is any solid or liquid waste which may present a threat of infections to humans
- ◎ Examples of Biomedical Waste
 - Non-liquid human tissue and body parts
 - Laboratory and veterinary waste
 - Discarded sharps
 - Human blood, human blood products
 - Body fluids contaminated with blood
 - Used absorbent materials saturated with dried blood or blood products that have excretions or secretions contaminated with blood
 - Disposable devices that have been contaminated with blood, and that have not been sterilized or disinfected by an approved method

Biomedical Waste Protocols

◎ How should you treat biomedical waste

- **Handling**

- All biomedical waste shall be handled using personal protective equipment (PPE)
- Minimally, protective gloves must be worn while handling or transporting all biomedical waste

- **Packing**

- All biomedical waste shall be packaged in impermeable RED polyethylene or polypropylene plastic bags
- These bags shall be sealed at the point of origin
- Sharps shall be placed in rigid leak proof containers

- **Labeling**

- Environmental Services labels all biomedical waste prior to putting in the storage container. The label contains the name, address, and phone number of the facility.
- Sharps containers shall be properly closed. Wrap tape around the container if the lid is not secured.
- Nursing will write the location or unit the container came from.

- **Transport**

- The transportation of biomedical waste shall be in an approved container.
- The container shall be RED in color, rigid, leak resistant, puncture resistant and constructed of smooth, easily cleanable materials that are impermeable to fluids and resistant to corrosion by disinfection agents.

Biomedical Waste

◎ How should you treat biomedical waste

• Segregation

- Biomedical waste shall be identified and segregated from other solid waste at the point of origin within the generating facility
- Biomedical waste, except sharps, shall be packaged in red bags that meet the specifications detailed in each State & Federal Administration Code.
- Discard Sharps shall be segregated from all other waste, and shall be placed directly in an approved sharps container.

• Storage

- All biomedical waste and sharps containers are placed in an approved container for storage until picked up by a licensed waste hauler.
- The container is exchanged on a weekly basis or more often if necessary.

• Biomedical Spills

- Surfaces contaminated with biomedical waste shall be cleaned with a solution of industrial cleaner.
- The surface shall be cleaned with a tuberculocidal germicide approved for hospital use.

• Biomedical Records

- All biomedical waste disposal certificates shall be kept for a period of three years
- The certificates are available for inspection during any survey
- **IMPORTANT:** Biomedical waste mixed with radioactive waste shall be managed and disposed of as radioactive waste.

Your Right to Know

- ◎ State and federal laws guarantee that you have a **RIGHT TO KNOW** about any toxic chemicals that you may be working with.
- ◎ You have the **RIGHT TO KNOW** if a chemical is on the Toxic Chemical List. You have a right to information about all chemicals, to an explanation of what hazards are, and how to protect yourself.
- ◎ Your supervisor or your Safety Officer will give you the information.

A Typical Safety Data Sheet (SDS)

- This is what a typical SDS will look like. Whether you find it on the Internet or look it up in the Yellow SDS Binder in your work area

		ABC Chemical Company 88 Lindsay Avenue Dorval, Quebec, Canada H9P 2T8 Telephone: 001-514-838-8148	
Fast Dry Cement		Product Code: ICC760	
SDS Preparation Date (dd/mm/yyyy): 02/11/2010		Page 1 of 10	
SAFETY DATA SHEET			
This safety data sheet complies with the requirements of Regulation (EC) No. 1907/2006.			
1. IDENTIFICATION OF THE SUBSTANCE / PREPARATION AND OF THE COMPANY / UNDERTAKING			
Product Identifier	: Fast Dry Cement		
Product Code(s)	: ICC760		
SDS No.	: ICCS-001		
Relevant identified uses of the substance or mixture and uses advised against	: Rubber repair cement providing optimum adhesion in cold (chemical) cure applications and can also be used with heat. Use pattern: professional use.		
Details of the supplier of the safety data sheet:			
ABC Chemical Company 88 Lindsay Avenue Dorval, Quebec, Canada H9P 2T8 Email: info@request@thecompliancecenter.com Dorval, Quebec, Canada H9P 2T8 Telephone : 001-514-838-8148 Emergency Telephone Number : 001-703-527-3887 (Chemtrec - U.S.)			
2. HAZARDS IDENTIFICATION			
Classification of the substance or mixture			

A Typical SDS

- The SDS has 16 sections.

- Sections listed:

- 1) Identification

- 2) Hazard(s) identification

- 3) Composition/info on ingredient

- 4) First aid measures

- 5) Fire fighting measures

- 6) Accidental release measures

- 7) Handling and storage

- 8) Exposure controls/personal protection

- 9) Physical and chemical properties

- 10) Stability and reactivity

- 11) Toxicology info

- 12) Ecological info

- 13) Disposal considerations

- 14) Transport into

- 15) Regulatory info

- 16) Other info

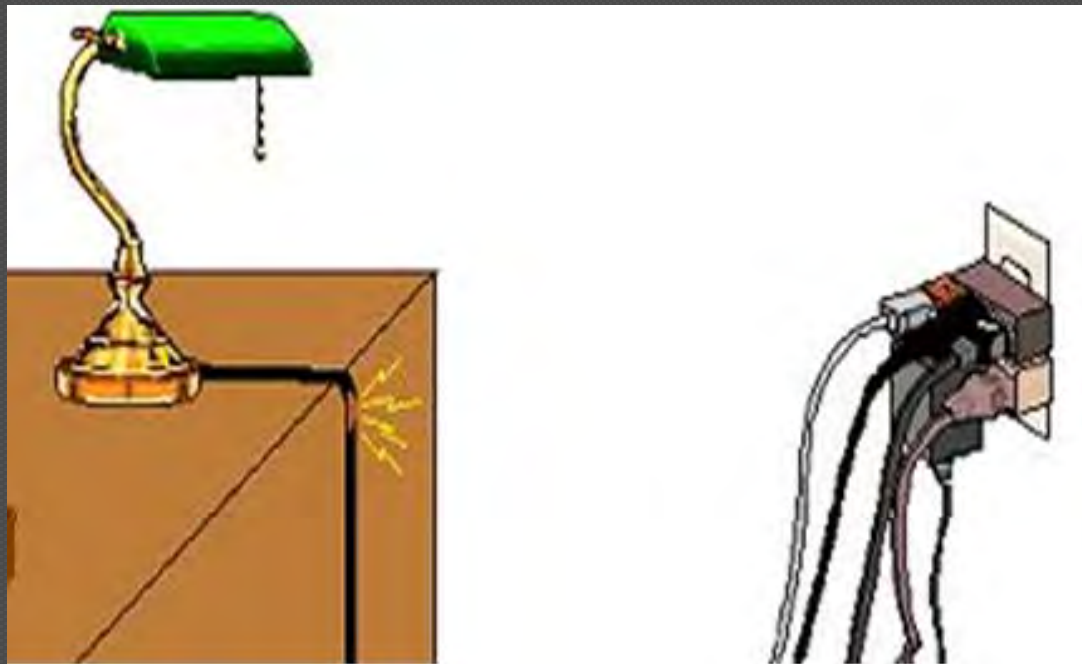
A Typical SDS

- ◎ The SDS is a good source of information about a hazardous chemical.
- ◎ The SDS is written by the manufacturer of the chemical. It is stored in your area in the SDS Binder.
- ◎ You have a right to see the SDS for the chemicals you work with.

Remember

- ◎ Remember – you have a RIGHT TO KNOW about the hazardous chemicals you work with
- ◎ Know where your Yellow SDS Binder is located in your area which list an inventory of all hazardous materials and SDS
- ◎ The SDS contains the important information about the hazards and protective measures.

Topic 4 – Safety Hazard Recognition



Overview

- ◎ It is important that everyone at our medical center and satellite facilities contribute to safety. This is accomplished by recognizing and correcting or reporting situations which could lead to accidents or incidents. These rules help maintain a safe environment for employees, patients, and visitors.
- ◎ In this topic, you will learn how to identify office, fire, electrical, and chemical safety hazards.

Fire Safety

- Do not block or wedge fire doors open. These doors help confine fire to keep it from spreading
- Do not block access to fire alarms, extinguishers, or oxygen shut-off valves. Make them easy to get to in an emergency.
- Never tamper with alarms or extinguishers
- Make sure emergency sprinklers will work when we need them! Do not hang items from them, don't stack items within 18 inches of them.
- Electrical hazards can be the main cause of fires. Be sure to follow all electrical safety rules.

Electrical Safety

- Do not jerk electrical cords to unplug them
- Do not plug too many plugs into one receptacle
- Check electrical cords and plugs – look for cracks, frays, or bare wire. Don't use any with defects!
- Don't string electrical cords where someone may trip
- Don't string cords over heat producing equipment.
- Make sure appliances are safe before using them in the hospital.

Office Safety

- Do not stack items on top of cabinets. They could fall and cause an injury.
- Don't leave drawers or files open where someone could trip over or run into them.
- Use only approved ladders to reach high items. Standing on chairs or desks could cause a fall.

Chemical Safety

- Store chemicals properly. Use combustibles and bio-hazardous storage when required
- Ensure all containers of hazardous chemicals are labeled, tagged or otherwise marked identifying name, type of hazard, and part of body affected.
- Read the label! Obey all precautions.
- Always be alert for uncontrolled chemical hazards in your workplace
- Know where your Green Safety Binder identifying how the organization complies with training and provides information about hazard chemicals is located
- Use proper Personal Protective Equipment

Taking Action

- ◎ Hazard recognition is a common sense skill.
- ◎ Sometimes, the hard part is making the correction after you see something wrong. Remember, we owe it to our patients, visitors and other employees to follow through when we see something unsafe and get it corrected.
- ◎ If we all cooperate, we can continue to maintain our excellent safety record.

Topic 5 – Security Management

Overview

- ◉ The goal of the Office of Security & Law Enforcement (OS&LE); is to establish and maintain a program for protection of patients, staff, visitors and medical center property.
- ◉ It is the intent of the Veterans Health Administration to provide protection for all properties, and to identify and evaluate security deficiencies that could be potential hazards, affecting the safety and security of patients, visitors and staff.
- ◉ This topic will help familiarize all employees with hospital security guidelines and regulations.
- ◉ Security Management Plan and Policies can be found on the VISN 19 intranet site.

Basic Security Guidelines

- ◉ Follow the healthcare system ID card policy
- ◉ Familiarize yourself with your work area staff, so you can easily identify persons who may not belong there.
- ◉ Report any suspicious persons to the VA Police immediately
- ◉ Watch for persons in uniform without identification. Even a person in a uniform may not belong.
- ◉ Be aware of supplies and materials in your area that are desirable theft items. Follow established procedures for protecting them.
- ◉ Lock doors when leaving unattended areas.

Identification

◎ Patient ID

- ID wrist bands are the primary method for patient identification. They are provided for patients by Emergency Room & Admitting Clerks and are to be worn by the patient at all times, unless medically impossible. If the wrist band is missing or unavailable, staff will confirm the patient's identity prior to proceeding with medications, procedures, tests and other processes and will be replaced as soon as possible.

Identification

○ Employee ID

- All employees are required to wear their ID badge; PIV badges will be worn above the waist (not hanging from a belt). If in a clinical position staff, it is strongly encouraged for staff to wear a break away lanyard.
- Badges are to be readily visible, with name and photograph easily observable (No alterations are authorized; i.e. placing a sticker over any part of the name)
- Photos are not be covered.
- Badges are to be replaced when expired

Guidelines on Theft Prevention

- ◎ Staff should discourage patients from wearing jewelry or keeping large amounts of cash.
- ◎ Encourage patients to keep pocket money and personal items out of view. Closets and drawers in patient rooms should be kept closed
- ◎ Secure computers and other expensive equipment to work stations if feasible.
- ◎ Put equipment and supplies away when not in use.
- ◎ Lock up purses and wallets when possible, or keep out of view.
- ◎ Lock desks and offices when unattended.

Guidelines on Theft Prevention

- Employees are expected to comply with all security regulations.
- An Incident Report will be completed for an employee(s) violating security regulations by VA Police after an investigation is completed. VA Police will also notify the employee's Section Chief and HR Officer.
- Security violations are subject to disciplinary action and could result in termination.

Smoking Regulations

- ◎ Smoking is prohibited inside the hospital!
- ◎ All public and patient-care areas are “Smoke Free.”
- ◎ Smoking is not permitted within the hospital’s buildings or vehicles. This restriction includes offices, restrooms, stairwells and other areas.
- ◎ Smoking by patients, staff and visitors is limited to areas designated by signs.

Parking Regulations

- Parking enforcement is specified in ECHCS Policy 07B-08.



Door Alarms

- ◎ Door alarms alert hospital personnel that someone has gone out one of the emergency exit doors.
- ◎ All hospital employees have the responsibility to respond to door alarms when they have been activated.

Role of VA Police

- Officers will interact with individuals on property; fostering a positive environment, address problem(s) and disturbances when identified.
- Police Service staff are responsible for following the chain of command as outlined in facility policies/procedures.
- Take part in providing a safe, secure environment for patients, staff and visitors.
- Patrol (by foot and/or vehicle) the building and grounds as a crime deterrence. Patrol patterns are altered routinely.
- Will lock entrances and check interior doors as described in facility policy.
- Officers will enforce Federal and State law and make arrest(s) when applicable.

Agitated, Assaultive and Violent People

- ◎ In the event a person becomes physically threatening or violent, notify VA Police Dispatch and activate your emergency crisis team (Code Yellow)
 - Dial the emergency number Hospital – 3911
 - CBOCs/PCLC/Satellite Facilities – 911
 - Give dispatcher your name, location and request a Code Yellow – be prepared to give information to the dispatcher
 - The crisis team members will proceed to the location to provide assistance.
 - If you cannot safely use a phone, activate your panic/duress alarm – this will activate a Code Yellow response

Active Threat Response

◎ EVACUATE

- Rapidly and safely leave the area – if you know where the threat is
- Leave your belongings behind
- Do not try to move wounded
- Prevent others from entering the area
- Call 3911 or 911; give a description of suspect(s) if known, type(s) of weapons, last known location. Stay on the line, DO NOT assume anyone has called

Active Threat Response

◎ EVADE

- Shelter in place, hide, be out of view
- If you cannot evacuate, find a safe location
- Silence cell phones/pagers
- Turn the lights off
- Remain quiet
- Call 3911 or 911 if you can without giving your location away
- Remain in hiding until law enforcement finds you

Active Threat Response

◉ ENGAGE

- Fight back (last resort)
- If you cannot evacuate or evade and your life is in danger, be aggressive
 - Throw items
 - Yell
 - Use improvised weapons (anything can be a weapon when your life is in jeopardy)
- COMMIT TO YOUR ACTIONS

Active Threat Responses

◉ COMPLY

- When law enforcement arrives
 - Remain calm and follow instructions
 - Drop items n your hands
 - Raise your hands and keep them visible
 - DO NOT yell, scream or point

Topic 6 – Medical Equipment Management



Overview

- ◎ To ensure the safety of our patients, our healthcare system has designed and implemented a Medical Equipment Management Plan (MEMP). This module will show the importance of proper selections, use inspections, and maintenance of medical and non-medical equipment to the safety and effectiveness of clinical care.
- ◎ This module will define medical equipment and address how equipment is assessed for risk, inspections of equipment, equipment training, incident reporting, equipment failures and policy references.

What is Medical Equipment?

- A medical device is defined as equipment used in the treatment, monitor and/or diagnosis of medical conditions.



Assessing the Risk

- ◎ Medical Equipment is evaluated for inclusion in the program using the following
 - Equipment Function
 - Physical Risks
 - Maintenance Requirements
 - Incident History

Inspections

- Some low risk devices or equipment (i.e. – exam tables) are not included in the program and are only visually inspected during environmental rounds.
- Medical equipment included in the program is
 - Inspected prior to initial use and at a prescribed frequency thereafter, usually annually. Biomed maintains inspection tracking and initiates follow-up as needed. This includes all equipment in the program, including leased, loaned, rented and patient owned medical equipment.
 - Tracked for equipment incidents and user errors
 - Tagged with a bar code and Biomed Inspection or Certification Label showing the equipment has been inspected and when it is due for next inspection

Equipment Training

- All employees who are responsible for using or maintaining equipment must be trained or assessed in the use and care of this equipment either by their supervisor or vendor training.
- If your job requires you to use equipment and you are not sure how to operate it, you should ask your supervisor to provide training before attempting to use the equipment.
- A copy of your equipment user/training materials must be kept in your department.

Incident Reporting

- ◎ Equipment involved in injury or death to a patient or near misses
 - Reported the incident to your Supervisor and the Patient Safety Manager.
 - Save all disposables and accessories, and fill out a patient incident report
 - Notify Biomedical Engineering
 - Refer to Policy 00Q-2, Patient Safety Improvement Program for additional information

Equipment Failures

- Have your work order clerk submit a work order request in Maximo
- Follow your service's specific emergency procedures for equipment failures in your area

Reference Documentation

- ◎ For additional information, refer to:
 - Policy FMS-15, Medical Equipment Management Program
 - Policy 00Q-2, Patient Safety Improvement Program

Topic 7 – Utility Systems Management



Definition

- Utilities are defined as a system of interdependent physical plant components which, as a whole provides a single useful function at multiple locations. Utilities include systems for electrical distribution, emergency power, vertical transport (elevators), heating, ventilating, air conditioning, plumbing, boiler and steam, medical gas/vacuum, and a number of other systems.

Assessing the Risk & Inspections

- ◉ Utility equipment is evaluated for inclusion in the program using equipment function, physical risks, and maintenance requirement & incident history.
- ◉ Inspection intervals are based on the utility being a crucial need and its function
 - Emergency generators are tested minimum of 1 hour each month and once a year for a 4 hour period to help train staff in what to expect during a power outage.

Training and Competencies

- ◎ Users and Maintainers receiving training on equipment included in the program from their supervisors
 - Training includes learning about:
 - Written policies and procedures
 - Service specific failure plans
 - Emergency plans
- ◎ Utility failure grids showing initial actions to be taken by the user are provided at all nursing stations and in all CBOCs
- ◎ Reference document located on the VA ECHCS Homepage

Incident Reporting

- Any failure of a utility or a utility component that affects patient care is reported to the Equipment and Utility Sub-Committee for evaluation and determination of a cause, as well as steps that can be taken to prevent a recurrence.



Examples of Basic Staff Response

◎ Telephone failures

- User overhead paging, emergency radios for internal communication
- Use emergency telephones and/or pay phones for external communication
- May need to activate “runners” to convey messages to nearby locations

◎ Water failures

- Call Facilities Management Service Initiate Fire watch
- Conserve water, use bottled water for drinking, turn off water in sinks
- Use waterless soap

Who to Contact during Failures

- ◉ IRMS – Computer & Telephone Failures
- ◉ Engineering Office – Electrical, Elevator, Gas, Sewer, Steam, Water and Ventilation Failures
- ◉ Biomedical – Patient care equipment failures
- ◉ In CBOCs and Pueblo NHCUC call 719-251-1220
- ◉ After hours failures call AOD.

Completion of Course

- ◎ To receive credit for training
 - Click on red x at top right corner of PDF
 - Click on Return to Content Structure button
 - Complete Examination